



Problem/Need

- Approximately 8-10 Veterans were dying alone in general hospital population annually.
- Hospice suite policy required caregiver attendance with Veteran 24-7.
- Heard about No One Dies Alone program and a similar program in development for Veterans on a monthly Palliative Care Council call.
- Researched program availability in National VAMC's and found there was no such program available to Veterans in the northeast.

Method

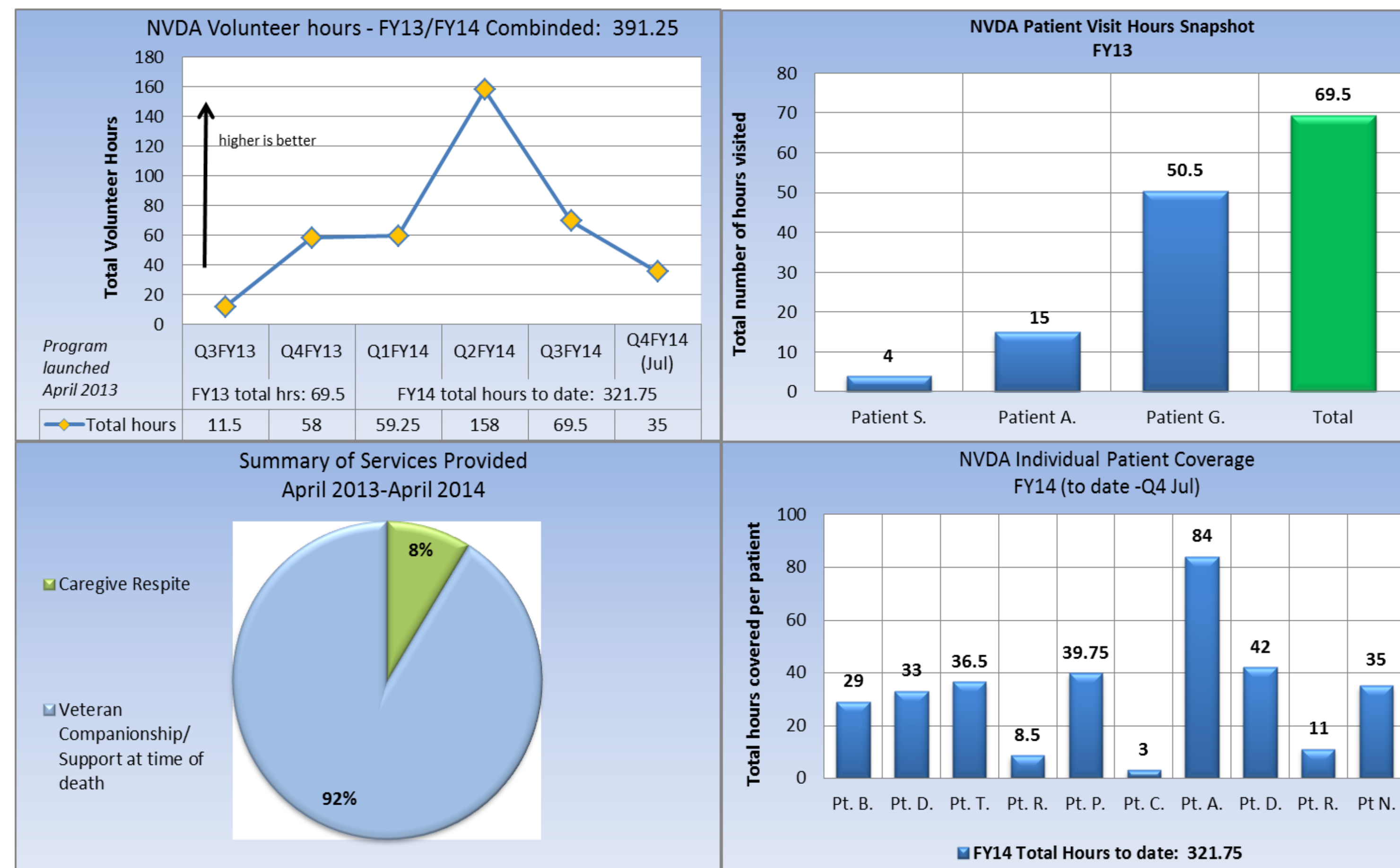
- In July 2012, applied for a grant through Veterans Education & Research Association of Northern New England, Inc. (VERANNE) to fund education for volunteer staff to become bedside companions for Veteran(s) who would be alone at end of life.

No Veteran Dies Alone



Results

- Completed first year of No Veteran Dies Alone Program, April 2014.
- Over 286 volunteer hours have been logged for 12 Veterans in the hospice suite(s). These hours include Caregiver Respite and Home Visits



Contact

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Lessons Learned

- Response was much greater than I anticipated!
- Process to register volunteers and complete background checks was labor intensive and expensive and slowed training progress.
- Process for obtaining a volunteer badge must be completed annually and concerned that this will cause attrition of volunteers.
- Staff education and marketing of the program was necessary in order to allow Veterans without caregivers to utilize hospice suite.
- Communication is important and necessary on all levels
- Not all 24 trained volunteers have been utilized in one year.
- The need for future training and additional volunteers is uncertain.